

June 28, 2011

Los Angeles County **Board of Supervisors** 

> Gloria Molina First District

TO: **Each Supervisor** 

Mark Ridley-Thomas Second District

Mitchell H. Katz, M.D. FROM:

Director

Zev Yaroslavsky Third District

Don Knabe

SUBJECT:

STATUS REPORT ON KEY INDICATORS OF PROGRESS. HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED

TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER - PROGRESS REPORT #58 (Agenda Item #S-1.

June 28, 2011)

Fourth District

Michael D. Antonovich Fifth District

Mitchell H. Katz. M.D. Director

John F. Schunhoff, Ph.D. Chief Deputy Director This is to provide your Board with the bi-monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of May 2011

**Census Trending** (ADC includes Psychiatric & Newborn Patients)

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The Average Daily Census (ADC) for the month of May was 575 out of 671 licensed beds, an estimated 84% utilization rate (86% occupancy). The census for Medical/Surgical units was an estimated 96% utilization rate (98% occupancy) for May 2011.

www.dhs.lacounty.gov

## **Emergency Department (ED) Indicators**

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Attachment #1 demonstrates favorable decreases in key indicators such as Average Length of Stay (ALOS) and Left Without Being Seen (LWBS).

The ED Boarding Time, ED Wait Time indicators as well as the number of patients transferred out remained relatively stable during this period. The Dangerously Overcrowded Level Comparison is 13% for this period, which represents an increase from 8% last month.

If you have any questions or need additional information please contact me or Pete Delgado, LAC+USC Chief Executive Officer at (323) 409-2800.

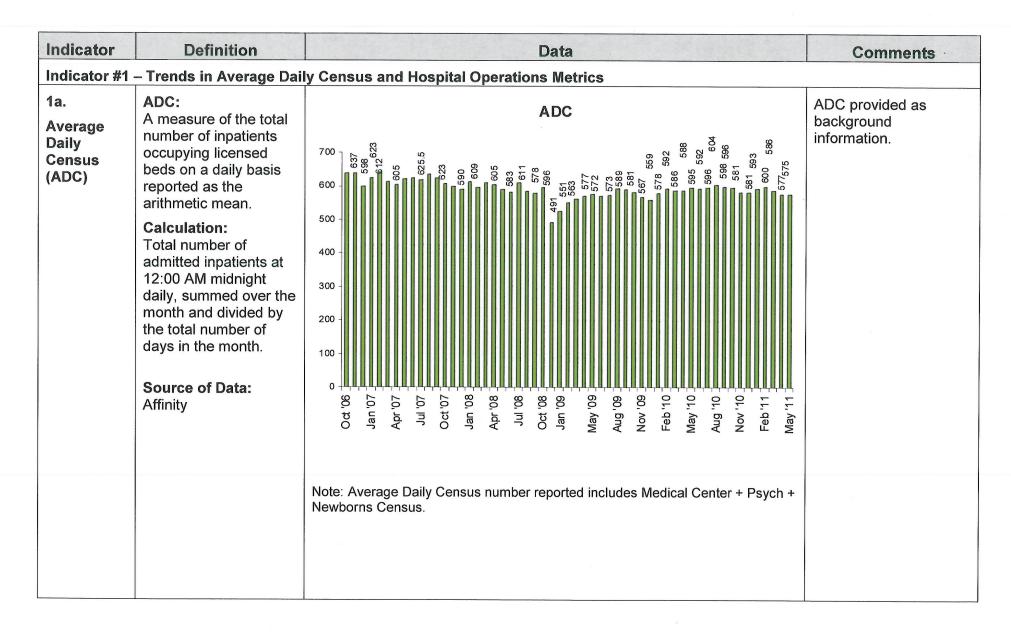
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Attachments

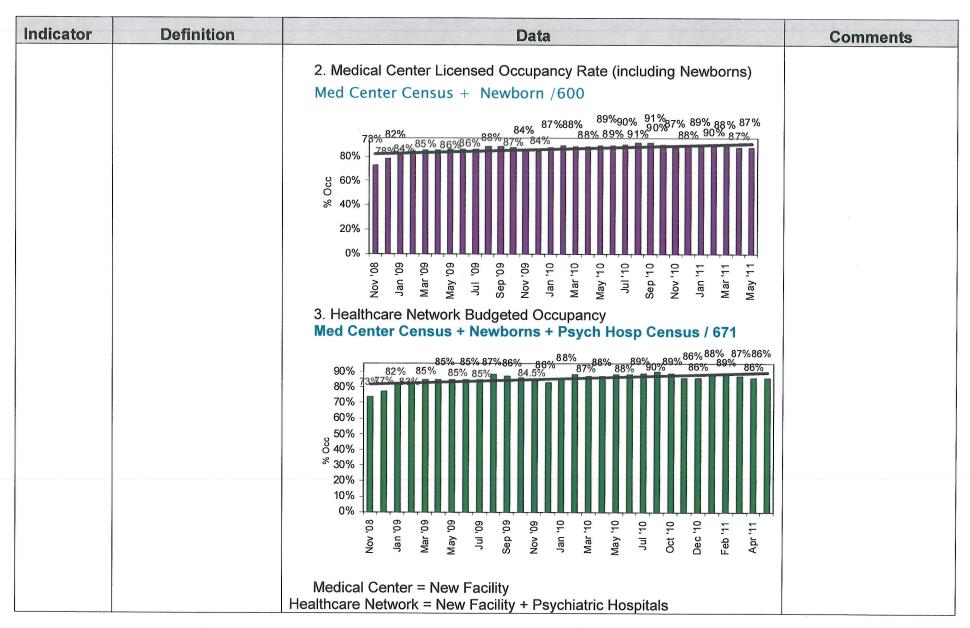
Chief Executive Office County Counsel Executive Office, Board of Supervisors



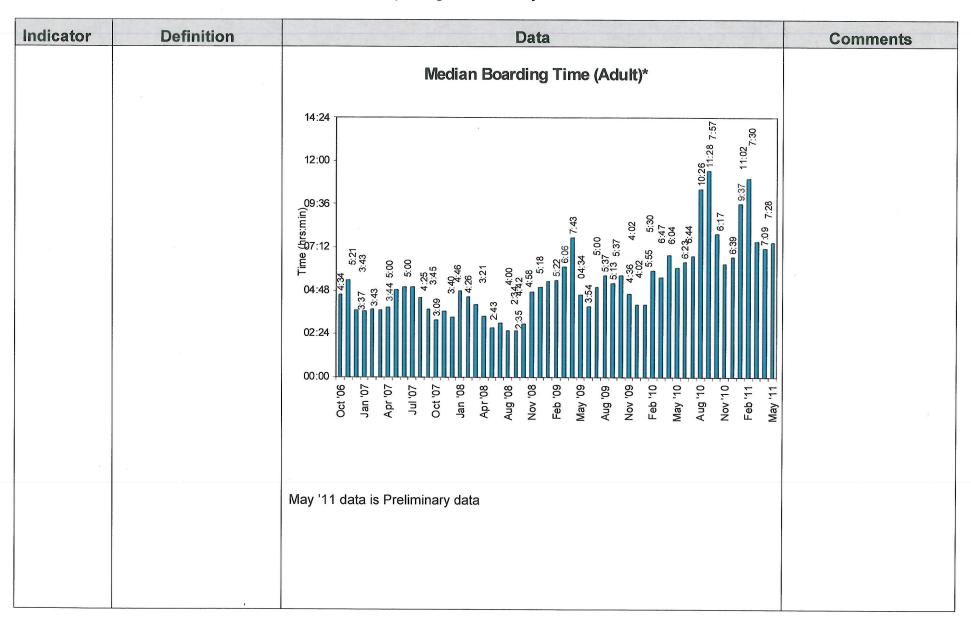
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Indicator	Definition	Data	Comments
Indicator #1	– Trends in Average Dail	y Census and Hospital Operations Metrics	
1b. Occupancy Rate LAC+USC Medical Center	Definition: A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.  Calculation: The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.  Source of Data: Affinity  Target: 95%	1. Medical Center Licensed Occupancy Rate (excluding Newborns) = Med Center Census - Newborns / 600	For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.



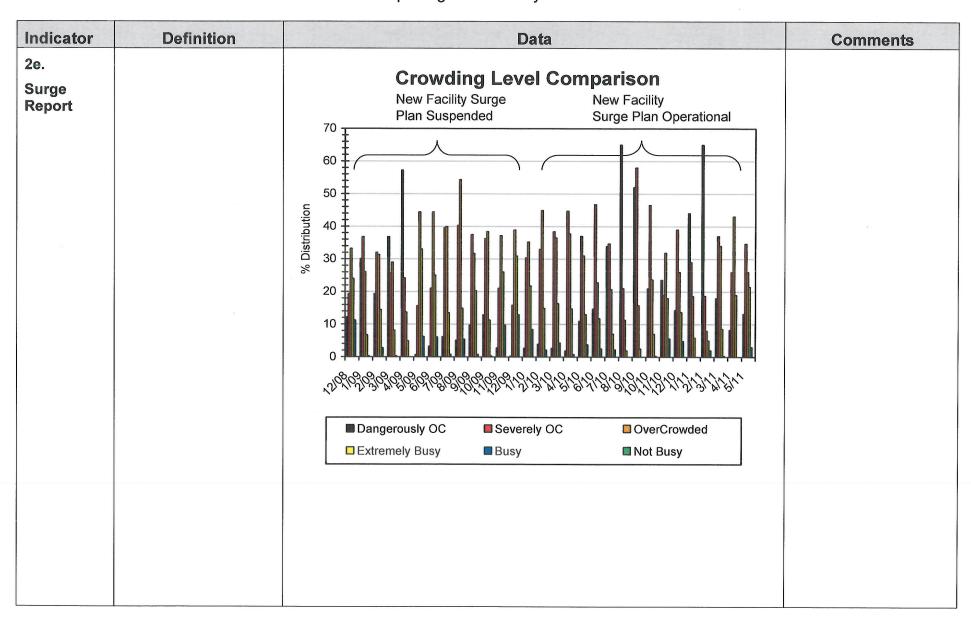
Indicator	Definition	Data	Comments
Indicator #2	- Emergency Departmen	t Metrics	
2a. Median Emergency Department Boarding Time (EDBT)	Boarding Time: Time from MD Admit time (effective date and time of pre-admit) to time the patient actually leaves the ED en route to assigned bed (effective date and time of the ED disposition).	14:24 12:00 9:36 (iii)  Median EDBT	
*Harris Rodde Indicator	Calculation: The middle value in the set of individual boarding times for the month arranged in increasing order. If there is an even number of values, then the median is the average of the middle two values.	Time (hr:min)  Nov '08  2:17  A:38  A:58  Jan '09  2:22  3:00  4:44  A:38  A:58  Jul '10  2:22  3:00  A:44  A:38  A:45  A:36  A:44  A:36  A:44  A:36  A:44  A:36  A:44  A:36  A:46  A:46	
	Source of Data: Affinity Target: Less than 7 hours.	→ Adult → Peds → Total  May '11 data is Preliminary data	



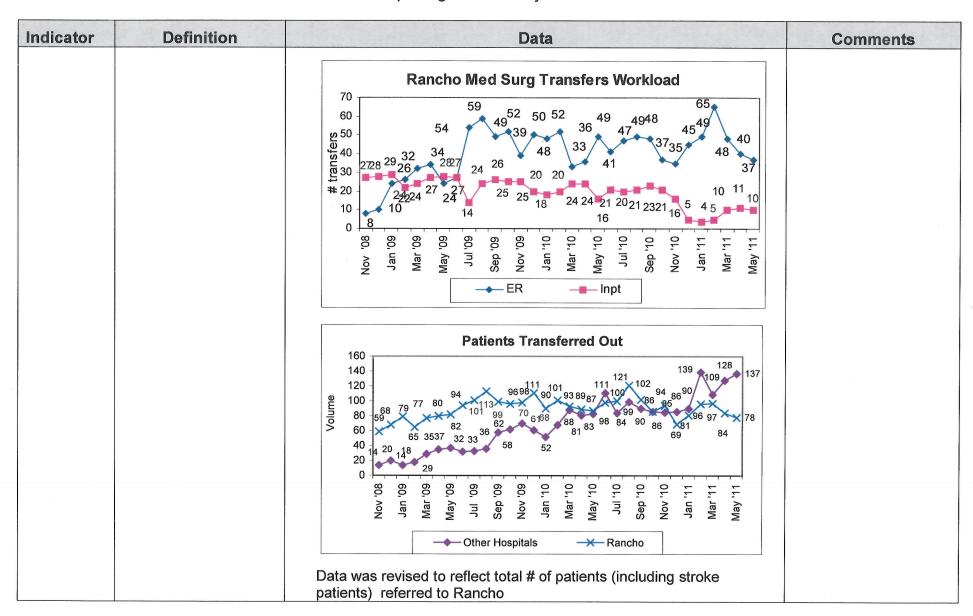
Indicator	Definition	Data	Comments
Indicator #2	- Emergency Departmen	t Metrics	
2b. ED Wait Time	ED Wait Time: Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.  Definition: Sum of all wait time values during the monthly reporting period divided by the total number of values.  Source of Data: Affinity  Target: No target value. Lower numbers are better.	Average ED Wait Time  14:24  12:20  13:012-38  12:3612:23  11:42  10:31  10:34  10:35  10:36  10:36  10:36  10:31  10:36  10:31  10:36  10:36  10:31  10:36  10:48  9:31  9	
		Adult Wait Time: *Excludes Psych, Pediatric, Observation Unit, and Jail patients	
		Total ED Wait time: *Excludes Psych, Observation Unit, and Jail  May '11 data is Preliminary data	

Indicator	Definition	Data	Comments
Indicator #2	- Emergency Departmen	t Metrics	
2c. Left Without Being Seen (LWBS)	LWBS: The total number of patients who left the ED without being seen by a physician reported as a percentage of all ED visits.	Left Without Being Seen  2500 2000 18% 16% 14%	
*Harris Rodde Indicator	Calculation: The total number of patients who left the ED without being seen divided by the total number of ED patient visits on a monthly basis.  Source of Data: Affinity Target: No target value. Lower numbers are better.	1000 - 12% - 10% -	

Indicator Definit	tion	Data		Comments
Indicator #2 - Emergency [	Department Metrics			
ED Diversion  A percentage of the time the diverts ambul traffic away fr ED, reported function of the for diversion of monthly basis  Calculation: The total numbours of ED of for a specific divided by the number of available hours in a moscillate.  Source of Da ReddiNet	e measure e ED lance from the as a e reason on a s.  single field by the field by t	75 69 63 58 58 58 59 60 61 59 50 52 52 53 542 34 42 40 38 31 32 32 32 32 32 32 33 34 35 36 31 32 32 33 34 35 36 37 38 38 38 38 38 38 38 38 38 38	79 63 53 7774 62 61 61 11 May '11 Way '11 May	This is slightly lower than the before move diversion history which generally ranged between 50-60%.  Key points:  Diversion is for paramedic runs only; Basic Life Support ambulances still arrive.  When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".

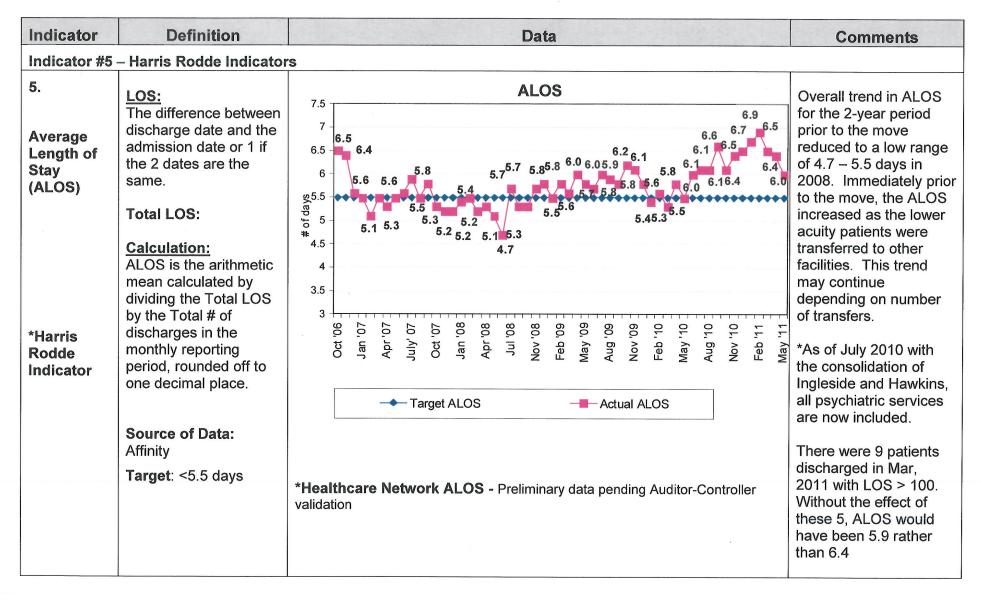


Indicator	Definition		Data	1		Comments
Indicator #3	<ul> <li>Trends for Patient Dive</li> </ul>	ersions and Transfers & #4	1 – Transfers	s to Rancho Los	Amigos Metric	S
3. & 4.	Transfers: The volume of patients transferred to RLAH for	Month of May '11				
Rancho		Referrals from ER:				
Los Amigos	acute hospitalization		Med/Surg	Acute Stroke	Total	
Hospital (RLAH)	from the Emergency Department and from	# Met transfer criteria	39	NA	-	
Transfers	Inpatient Units.	# Referred to RLAH	37	29	66	
	D ( 0	# Transfers	37	29	66	g.
	Data Source: Manual record keeping.	# Denied	0	NA	-	
,	I managan recess a mespangi	# Cancelled	2*	NA	-	
	Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.	# Patients refused*	1	NA	-	
		Referrals from Inpatients	<b>):</b>			
			Med/Surg	Acute Stroke	Total	
		# Met transfer criteria	10	NA	-	
		# Referred to RLAH	10	2	12	
		# Transfers	10	2	12	
		# Denied	0	NA	-	
		# Cancelled	0*	NA	-	
		# Patients refused*	0	NA	-	
		Other /Pending	0	NA	-	



## LAC+USC Medical Center Operational Monitoring Report

Reporting Period –May 2011



Indicator	Definition			Data			Comments	
Indicator #6 – Pediatric Metrics								
6.	Census: The total number	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent		
Pediatric Bed	admitted pediatric	Nov-08	56%	54%	50%	(20 Beds) 33%		
Census and	inpatients at 12:00 AM	Dec-08	52%	60%	60%	40%		
Occupancy	midnight of a	Jan-09	52%	68%	70%	75%		
(%)		Feb-09	50%	80%	80%	85%		
1000 House St. 1000	designated pediatric	Mar-09	57%	72%	70%	80%		
	ward.	Apr-09	57%	60%	60%	75%		
Pediatric ICU	Occupancy:	Jun-09	60%	64%	60%	75%		
(PICU)	The total number of	Jul-09	57%	72%	60%	80%		
` , ,	admitted pediatric	Aug-09	55%	64%	60%	80%		
Neonatal ICU	inpatients divided by	Sep-09	55%	68%	70%	80%		
(NICU)	the total number of	Oct-09	45%	60%	60%	80%		
Pediatric Unit		Nov-09	35%	64%	70%	70%		
rediatric Offic	licensed beds on that	Dec-09	40%	64%	70%	65%		
Adolescent	unit and reported as	Feb -10	65%	84%	80%	80%		
Unit	percentage.	Mar -10	65%	68%	60%	75%		
		Apr-10	60%	64%	60%	80%		
	Source of Data:	May -10	67.5%	68%	80%	80%		
		Jun -10	65%	64%	70%	80%		
	Affinity	Jul -10	60%	68%	80%	85%		
		Aug -10	62%	68%	60%	85%		
		Sep -10	72.5%	60%	60%	80%		
		Oct -10	60%	60%	60%	75%		
		Nov-10	67.5%	48%	50%	70%		
		Dec -10	62%	60%	50%	65%		
		Jan -11	55%	60%	70%	70%		
		Feb -11	57%	68%	80%	80%		
		Mar- 11	57%	60%	70%	75%		
		Apr-11	55%	64%	50%	75%		
		May -11	57%	56%	50%	80%		